Applying for Admission

Application Steps for Master of Arts in Teaching, Teaching Licensure (MAT) Applicants:

1. Complete the entire Graduate Degree Seeking Application thoroughly. An incomplete application cannot be considered and will be returned to the applicant.

2. Submit the non-refundable application fee of $50. Checks or money orders should be made payable to Belmont University.

3. Submit two recommendation forms - Have two people (non-relatives) complete a recommendation form (enclosed in this application packet). On the form, clearly indicate for which Graduate Education Teacher Licensure track you are applying.

4. Submit official transcripts from all colleges and/or universities attended, even those from which transfer credits were received. For a transcript to be official, it may not be marked “Issued to Student” or have previously been opened. All official transcripts must be on file with the Office of Admissions before an admissions decision can be made. In addition, applicants with postsecondary coursework from foreign institutions must have their transcripts evaluated by a foreign credential evaluation service such as, World Education Services (www.wes.org) or Joseph Silny (www.jsilny.com). The evaluation and all official transcripts must be submitted. Please allow 4-6 weeks for all official transcripts to be received.

5. Submit official test scores from GRE (Graduate Record Examination) or MAT (Miller Analogies Test) test. Test scores must have been earned within the last five years. Please allow 4-6 weeks for official test scores to be received.

6. Submit a one-page letter on why you want to pursue the program.

7. Submit a current resume.

Admissions Requirements

Admission requirements are program specific. For a list of the admissions requirements, please visit the admissions website (http://www.belmont.edu/prospectivestudents/graduate/index.html) and click on the program you wish to view. Applications for admission are also program specific so be sure to download and submit the application of the program to which you intend to apply. You can find a list of program applications at (http://www.belmont.edu/prospectivestudents/graduate/index.html).

International Applicants

1. International applicants whose native language is not English must demonstrate proficiency in the English language by submitting official TOEFL scores (required minimum of 550 PBT or 80 iBT) or by successful completion of ELS Language Center Level 112.

2. International applicants with college level coursework from foreign institutions must have their transcripts evaluated by a credential evaluation service such as World Education Services (www.wes.org) or Joseph Silny & Associates (www.jsilny.com).

3. In order to be issued an I-20 for the desired entry term, international applicants must be admitted no later than October 1, March 1, or June 1 in order to enroll for spring, summer, or fall terms respectively.
Belmont University
Degree Seeking Application for Graduate Admission

Applicant Information
Term you are applying for ________________
Degree you are applying for ___________ Master of Arts in Teaching ________________
Program you are applying for ________________ Teacher Licensure ________________

Please choose a track/concentration:
- Early Childhood (Grades PreK-3)
- Elementary (Grades K-6)
- English as a Second Language (Grades K-12)
- Middle School (Grades 4-8)
- Secondary Biology (Grades 7-12)
- Secondary Chemistry (Grades 7-12)
- Secondary English (Grades 7-12)
- Secondary French (Grades 7-12)
- Secondary German (Grades 7-12)
- Secondary Government (Grades 7-12)
- Secondary History (Grades 7-12)
- Secondary Latin (Grades 7-12)
- Secondary Math (Grades 7-12)
- Secondary Physics (Grades 7-12)
- Secondary Psychology (Grades 9-12)
- Secondary Sociology (Grades 9-12)
- Secondary Spanish (Grades 7-12)
- Secondary Speech Communication (Grades 7-12)

Have you previously applied for admission to Graduate Studies at Belmont University? ☐ Yes ☐ No
If yes, what program? _________________________ for what term? ________________
Have you previously attended Belmont University? ☐ Yes ☐ No
If yes, for what term? ________________

Personal Data
First Name ___________________________ Middle Name ___________________________ Last Name ___________________________
Preferred First Name ________________________ Former Last Name (if any) ___________________________
Social Security Number: ________________________ Email Address ___________________________
Mailing Address Line 1 ___________________________
Mailing Address Line 2 ___________________________
City ___________________________ State/Province ___________________________ Zip/Postal Code ___________________________ Country ___________________________
Home Phone (____) ___________________________ Work Phone (____) ___________________________ Cell Phone (____) ___________________________
Please select your citizenship status
☐ US Citizen  ☐ Dual US Citizen  ☐ Permanent US Resident  ☐ Other

If you are not a US Citizen, please fill out the International Supplement.

The following information is requested for statistical purposes only; completion is optional
Date of Birth ___________ Gender ☐ Male ☐ Female
Are you a US Armed Services Veteran? ☐ Yes ☐ No
Marital Status ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Remarried ☐ Widowed
Religious Preference ___________________________

Ethnic Background: Are you Hispanic or Latino? ☐ Yes ☐ No
Regardless of your answer to the prior question, please check one or more of the following groups in which you consider yourself to be a member.
- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
Education Information

List the names and locations of all colleges/universities at which you have taken courses (including Belmont if you are a former student) and the degrees you have been awarded starting with the most recent. Please attach Additional Education Information Sheet, enclosed in this application packet, if needed. All official transcripts must be mailed directly to the Belmont University Office of Admissions from each institution. In addition, students with postsecondary course work from foreign institutions must have their transcripts evaluated by a foreign credential evaluation service such as World Education Services (www.wes.org) or Joseph Silny (www.jsilny.com).

Institution Attended 1

College/University Name ________________________________
City __________________________ State/Province __________ Country __________________________
Date attended from (MM/DD/YYYY): __________ to: __________ GPA earned at this college (on a 4.00 scale): __________
Degree earned/expected ____________________________ if no degree earned/expected, please leave blank

Institution Attended 2

College/University Name ________________________________
City __________________________ State/Province __________ Country __________________________
Date attended from (MM/DD/YYYY): __________ to: __________ GPA earned at this college (on a 4.00 scale): __________
Degree earned/expected ____________________________ if no degree earned/expected, please leave blank

Institution Attended 3

College/University Name ________________________________
City __________________________ State/Province __________ Country __________________________
Date attended from (MM/DD/YYYY): __________ to: __________ GPA earned at this college (on a 4.00 scale): __________
Degree earned/expected ____________________________ if no degree earned/expected, please leave blank

Employer Information (if applicable)

Employer Name __________________________ Current Position __________________________
Address ________________________________________________
City __________________________ State/Province __________ Zip/Postal Code __________ Country __________________________
Former Employer Name __________________________ Position __________________________
Address ________________________________________________
City __________________________ State/Province __________ Zip/Postal Code __________ Country __________________________

In case of emergency, notify the person below

First Name __________________________ Last Name __________________________ Relationship __________________________
Address ________________________________________________
City __________________________ State/Province __________ Zip/Postal Code __________ Country __________________________
Phone (_____) __________________________
**Background Information**

Have you ever been expelled or suspended from any high school or college?

☐ Yes  ☐ No  If yes, please describe in detail:

Have you ever been convicted of (or is any charge now pending against you for) any crime other than a traffic violation?

☐ Yes  ☐ No  If yes, please describe in detail:

**References**

*College of Law applicants are not required to submit letters of reference.*

For all other applicants, please list the name and address of two persons who know you (professionally and/or academically) and are willing to address your ability, interest and motivation for pursuing this program. Give each person a recommendation form and instruct them to return it directly to the admissions office. Your application cannot be reviewed until all references have been received.

1. 

2. 

I certify that all information given is complete and accurate. I understand that my failure to provide complete and accurate information may result in dismissal from the university or other appropriate disciplinary action. If admitted to Belmont University, I agree to abide by the policies and provisions stipulated in the university catalog.

Signature of Applicant __________________________ Date __________________________

For information regarding Belmont University’s campus security record and policies, please contact the Belmont University Office of Safety and Security at (615) 460-6617. In compliance with the Student Right to Know Act, Belmont’s persistence (retention) rates are available at the Institutional Research Office. In compliance with federal law, including provisions of Title IX of the Education Amendments of 1972, Sections 504 of the Rehabilitation Act of 1973, Belmont University does not discriminate on the basis of race, sex, color, national or ethnic origin, age, disability, military service, or sexual orientation in its administration of education policies, programs or activities; its admissions policies; or employment. Under federal law, the university may discriminate on the basis of religion in order to fulfill its purposes. The university has appointed the director of the Office of Human Resources to serve as coordinator of compliance with Title IX. Inquiries or complaints should be directed to the Office of the Provost or the Office of Human Resources.

Visit www.belmont.edu/prospectivestudents/graduate/ in order to confirm individual program requirements. Please forward all materials, including a $50 application fee, to: Belmont University, Office of Admissions, 1900 Belmont Blvd., Nashville, TN 37212-3757, or fax to 615-460-5434.

**How did you learn about Belmont University’s Graduate Programs? (please check all that apply)**

☐ Academic Advisor  ☐ Advertisement  ☐ Another College/University  ☐ Belmont Alumnus  

☐ Belmont Current Student  ☐ Belmont Faculty/Staff  ☐ College Fair  ☐ Employer  

☐ Friend  ☐ GRE  ☐ Internet  ☐ Letter or Email from Belmont  

☐ Professional Association  ☐ Publications  ☐ Other  

Please provide names and/or details for the source checked above:
Belmont University
Additional Education Information

Institution Attended 4
College/University Name ________________________________________________________
City ____________________________ State/Province ___________ Country _____________
Date attended from (MM/DD/YYYY): ___________ to: ___________ GPA earned at this college (on a 4.00 scale): _______
Degree earned/expected ___________________________________ if no degree earned/expected, please leave blank

Institution Attended 5
College/University Name ________________________________________________________
City ____________________________ State/Province ___________ Country _____________
Date attended from (MM/DD/YYYY): ___________ to: ___________ GPA earned at this college (on a 4.00 scale): _______
Degree earned/expected ___________________________________ if no degree earned/expected, please leave blank

Institution Attended 6
College/University Name ________________________________________________________
City ____________________________ State/Province ___________ Country _____________
Date attended from (MM/DD/YYYY): ___________ to: ___________ GPA earned at this college (on a 4.00 scale): _______
Degree earned/expected ___________________________________ if no degree earned/expected, please leave blank

Institution Attended 7
College/University Name ________________________________________________________
City ____________________________ State/Province ___________ Country _____________
Date attended from (MM/DD/YYYY): ___________ to: ___________ GPA earned at this college (on a 4.00 scale): _______
Degree earned/expected ___________________________________ if no degree earned/expected, please leave blank
Belmont University
International Supplement

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
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<table>
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<tr>
<th>Email Address</th>
<th>Date of Birth</th>
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<tr>
<th>Mailing Address Line 1</th>
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<th>City</th>
<th>State/Province</th>
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<th>Home Phone (___)</th>
<th>Work Phone (___)</th>
<th>Cell Phone (___)</th>
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List any non-US countries of citizenship

<table>
<thead>
<tr>
<th>Place of birth</th>
<th>City/Town</th>
<th>State/Province</th>
<th>Country</th>
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</table>

First language

Primary language spoken at home

If you are a Permanent US Resident list your Alien Registration #

If you have another citizenship status list your Visa Type
Applicant’s Name ___________________________________________ First Name ___________________________
                        Middle Name ___________________________________________ Last Name ___________________________
Preferred Name ___________________________________________ Date of Birth ___________ MM/DD/YYYY
Address ____________________________________________________________ Street __________ City __________ State __________ Zip __________
Country _____________________________________________________________ Email _____________________________________________________________
Home Phone ___________________________ Cell Phone ___________________________

Please answer the following questions:

Are you planning to:

☐ Attend graduate school full-time?
☐ Attend graduate school part-time?

Are you planning to be an intern?* (This question applies only to those students seeking a Master of Arts in Teaching degree. If you are seeking a degree in another education program, please choose ‘No’.):

☐ Yes
☐ No
### Graduate Programs Recommendation Form

**This section to be completed by the applicant**

<table>
<thead>
<tr>
<th>Applicant's Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
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</thead>
<tbody>
<tr>
<td>Preferred Name</td>
<td>Date of Birth</td>
<td>MM/DD/YYYY</td>
<td></td>
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</table>

**Country**  

**Email**

**Note to Candidate:**

Please enter your name above and deliver one copy of this form to two individuals who will provide you with a recommendation. Under the Family Educational Rights and Privacy Act of 1974, students enrolled at Belmont University have access to their educational records, including letters of evaluation. However, students may waive their right to see letters of evaluation, in which case the letters will be held in confidence. If the applicant has not signed the waiver below, he or she may request to see the recommendation forms after enrolling at Belmont University.

I hereby [ ] waive [ ] do not waive my right of access to this document should I matriculate to Belmont University.

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Date:</th>
</tr>
</thead>
</table>

**Term you will enter**

**Degree you are applying for**

**Program you are applying for**

**Program Track/Concentration**

**This section to be completed by the evaluator**

You are completing a recommendation for an applicant to a graduate program at Belmont University. Your assessment is very important to the Admissions Committee, and we greatly appreciate the time and effort on your part in giving us your appraisal of this candidate.

<table>
<thead>
<tr>
<th>Name</th>
<th>Current Occupation</th>
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<th>Current Employer/Organization</th>
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How long have you known this applicant?  

In what capacity do you know this applicant?  

---

Belmont University
Is there any aspect of this applicant’s background that might interfere with successful completion of their graduate study?
☐ Yes  ☐ No  If yes, please specify: __________________________________________________________

Please describe those qualifications, traits, or accomplishments you feel are significant in demonstrating the applicant’s ability to complete the program to which he or she is applying: __________________________________________________________

____________________________________________________________________________________________________________________

In what areas do you think the candidate needs the most improvement? __________________________________________________________

____________________________________________________________________________________________________________________

How well do you think the applicant has considered plans for graduate study? __________________________________________________________

____________________________________________________________________________________________________________________

How well do you think the applicant will perform in an environment that stresses a high degree of teamwork, independent thought and action, and personal motivation? __________________________________________________________

____________________________________________________________________________________________________________________

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<th>Emotional stability</th>
<th>Exceptional (Top 5%)</th>
<th>Outstanding (Top 15%)</th>
<th>Above Average (Top 1/3)</th>
<th>Average (Middle 1/2)</th>
<th>Below Average (Bottom 1/3)</th>
<th>Not Able to Rate</th>
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<td>Ability to work with others (teamwork)</td>
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<td>Problem Solving</td>
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Please complete this section ONLY IF YOU ARE EVALUATING AN APPLICANT FOR GRADUATE STUDY IN MUSIC:

Music Performance Ability | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
Knowledge of music history and theory | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
Aural Skills | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

In regards to this student’s application to graduate study at Belmont University:
☐ Highly Recommend  ☐ Recommend  ☐ Recommend with Reservation  ☐ Do Not Recommend

You may attach any additional comments you feel would help us in assessing this applicant. Please forward this form to: Belmont University, Office of Admissions, 1900 Belmont Blvd., Nashville, TN 37212-3757 or fax to 615-460-5434.

Signature: ___________________________  Date: ___________________________
Belmont University
Graduate Programs Recommendation Form

This section to be completed by the applicant

Applicant's Name ________________________________

First Name ____________________ Middle Name __________ Last Name ________________

Preferred Name ________________________________ Date of Birth ________________ MM/DD/YYYY

Country ________________________________ Email ________________________________

Note to Candidate:
Please enter your name above and deliver one copy of this form to two individuals who will provide you with a recommendation. Under the Family Educational Rights and Privacy Act of 1974, students enrolled at Belmont University have access to their educational records, including letters of evaluation. However, students may waive their right to see letters of evaluation, in which case the letters will be held in confidence. If the applicant has not signed the waiver below, he or she may request to see the recommendation forms after enrolling at Belmont University.

I hereby ☐ waive ☐ do not waive my right of access to this document should I matriculate to Belmont University.

Signature: ________________________________ Date: ________________

Term you will enter ________________________________

Degree you are applying for ________________________________

Program you are applying for ________________________________

Program Track/Concentration ________________________________

This section to be completed by the evaluator

You are completing a recommendation for an applicant to a graduate program at Belmont University. Your assessment is very important to the Admissions Committee, and we greatly appreciate the time and effort on your part in giving us your appraisal of this candidate.

Name ________________________________ Current Occupation ________________________________

Current Employer/Organization ________________________________

Address ________________________________

City ________________________________ State/Province __________ Zip/Postal Code __________

Phone (______) ______________________ Email Address ________________________________

How long have you known this applicant? ________________________________

In what capacity do you know this applicant? ________________________________
Is there any aspect of this applicant’s background that might interfere with successful completion of their graduate study?

☐ Yes  ☐ No  If yes, please specify: ________________________________________________________________

Please describe those qualifications, traits, or accomplishments you feel are significant in demonstrating the applicant’s ability to complete the program to which he or she is applying: ________________________________________________________________

______________________________________________________________

In what areas do you think the candidate needs the most improvement? ________________________________

______________________________________________________________

How well do you think the applicant has considered plans for graduate study? ________________________________

______________________________________________________________

How well do you think the applicant will perform in an environment that stresses a high degree of teamwork, independent thought and action, and personal motivation? ________________________________

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Knowledge of music history and theory | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
Aural Skills | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

In regards to this student’s application to graduate study at Belmont University:

☐ Highly Recommend  ☐ Recommend  ☐ Recommend with Reservation  ☐ Do Not Recommend

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Signature: ____________________________ Date: ____________________________
Belmont University
Graduate Application Fee Form

Applicant’s Name ___________________________________________________________________________________

Preferred Name __________________________                   Date of Birth ________________________

Program Applying for __________________________            Term Applying for ________________________

Instructions: The $50.00 non-refundable application fee may be paid by check, money order, or credit card. Check or money orders should be made payable to Belmont University.

Please indicate your method of payment:

- [ ] Check (Payable to Belmont University)
- [ ] Money Order (Payable to Belmont University)
- [ ] VISA
- [ ] MasterCard
- [ ] Discover
- [ ] American Express

If you are paying by credit card, complete the credit card authorization below

Card Number: ____________________________

Amount to be charged: $50.00

Expiration Date (MM/YYYY):

Cardholder’s Name: ____________________________

Cardholder’s Signature: ____________________________
Belmont University does not discriminate on the basis of race, sex, color, national or ethnic origin, age, disability, military service, or sexual orientation.